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CONFIRMATION NO. 7403

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|------------------------------------|---|---------------------|-------------------------------|--|
| SERIAL NUMBER 10/804,845 | FILING OR 371(c) DATE 03/19/2004 RULE | CLASS 514 | GROUP ART UNIT 1647 | ATTORNEY DOCKET NO. DIA1809-005B |
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APPLICANTS

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3/27/2007

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3/27/2007

** CONTINUING DATA *****

This appln claims benefit of 60/550,050 03/03/2004

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
 08/10/2004

** SMALL ENTITY **

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|---|--|--|-------------------------------|-------------------------|-----------------------|----------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | Met after Allowance <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY SWEDEN | SHEETS DRAWING 50 | TOTAL CLAIMS 34 | INDEPENDENT CLAIMS 8 |
|---|--|--|-------------------------------|-------------------------|-----------------------|----------------------------|

ADDRESS
 45684

TITLE

Immunomodulation by a therapeutic medication intended for treatment of diabetes and prevention of autoimmune diabetes

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| FILING FEE RECEIVED 791 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
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